

Lunch Account Purchase Limits

Parent/Guardian Authorization Form

Please return completed forms to Amy Gittins at agittins@pomptonian.com

Child Name: _____

School Name: _____

Grade: _____

_____ Please restrict meal purchases to cash or pre-paid balances only.
(Do not permit meal charges on account without pre-authorization)

_____ Please set my maximum meal purchase amount to \$ _____

_____ Please restrict snack purchases to cash only

_____ Please limit snack purchases to \$ _____ (\$1, \$2, or \$3) daily
maximum

_____ Other _____

(Examples: Restricting the number of snacks allowed to be
purchased per day, not allowing certain snack (i.e. chips, ice
cream), no a la carte items.

Name (Printed)

Signature of Parent/Guardian

Date

Please note that students can make purchases with cash or with the meal account associated with their student ID, without restriction, unless this document is completed and returned. Parents/Guardians can pay outstanding balances, or fund the lunch account, with check payable to Chester Board of Education or through <https://www.mymealtime.com/>.